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CONFIRMATION NO. 5217

<b>SERIAL NUMBER</b> 10/628,793	<b>FILING OR 371(c) DATE</b> 07/28/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> 5490-000332
<b>APPLICANTS</b> Robert Metzger, Wakarusa, IN;				
** CONTINUING DATA ***** None AX 7/24/06				
** FOREIGN APPLICATIONS ***** None. AX 7/24/06				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> ** 10/22/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Amurda</i> Examiner's Signature <i>Amurda</i> Initials		<b>STATE OR COUNTRY</b> IN	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 22 <b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> Stephen J. Foss Harness, Dickey & Pierce, P.L.C. P.O. Box 828 Bloomfield Hills, MI48303				
<b>TITLE</b> Method and apparatus for minimally invasive distal femoral resection				
<b>FILING FEE RECEIVED</b> 1134	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	